



DoD Joint Inspector General Course Registration Form



DATE

PRIVACY ACT STATEMENT

AUTHORITY: 5 U.S.C. § 552a, Departmental Regulations

PURPOSE: To obtain personal and emergency contact data from students attending the DoD Joint Inspector General Course.

ROUTINE USE(S): Data is used by the Learning Delivery Division for academic purposes.

DISCLOSURE: Voluntary. However, failure to provide the requested information may result in not attending the course, not being notified in case of emergency, or not completing the course.

Student Information

(Failure to submit the below information may delay course registration and prevent course attendance)

Class Requested

Military

Civilian

Last Name

Branch

Agency

First Name

Rank

Grade

Title

Select: Mr.U

Phone

Mrs. Miss

DSN

Other

Email

Command/Agency Upon Graduation from the Course

Prior IG Education/Experience

Parking Request

Name

School

Tag #

Address

Date Grad.

State

City, State, Zip

Years/Mos.

Cell Phone

Special Accommodation

Emergency Contact Info.

Please fill out the form completely. Prior to your arrival, you will receive student information and course material. Notify the Registrar immediately if you will no longer be attending the class requested.

JointIGRegistrar@dodig.mil

Fax: (571) 372-7422

Registrar Use Only

Received

Entered

Registered Standby

Confirmation

Email Confirm Registration Rec'd

Emailed General Info

Emailed Student Materials